

	A	B	C	D	E
2		<b>Moderate Needs Flex Funds Budget Worksheet - CFC/M</b>			
4		Participant Name:			
5		Surrogate (If applicable):			
6		Service Authorization Start Date:		End Date:	
7		<b>Goals related to services:</b>			
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12		<b><u>Running Totals:</u></b>	<b><u>Maximum</u></b>	<b><u>Budgeted</u></b>	<b><u>Available</u></b>
13		Year	\$3,500	\$0	\$3,500
14		Monthly	\$292	\$0	\$292
15		Bi-Weekly	\$135	\$0	\$135
16					
17		<b><i>Identify Goods &amp; Services and Self-Hired services based on participant goals and assessed ne</i></b>			
18		<b><u>A. Goods &amp; Services</u></b>	<b><u># Units/Year</u></b>	<b><u>Cost per Unit</u></b>	<b><u>Annual Cost</u></b>
19	#1.				\$0
20	#2.				\$0
21	#3.				\$0
22	#4.				\$0
23	#5.				\$0
24		Total Year:			<b>\$0</b>
25					
26		<b><u>B. ARIS Self-Hire Attendant</u></b>	<b><u># Hours/2wks</u></b>	<b><u>Hourly Wage</u></b>	<b><u>Annual Cost</u></b>
27	#1.				\$0
28	#2.				\$0
29	#3.				\$0

	A	B	C	D	E
30	#4.				\$0
31	#5.				\$0
32		Total Wages/Year:			\$0
33			<u># Months/Year</u>	<u>Cost per Mon.</u>	<u>Annual Cost</u>
34	<b><u>C. ARIS Fiscal ISO Cost/Month</u></b>			\$67.00	\$0
35					
36	<b><u>D. Admin Fee</u></b>		<u># Months/Year</u>	<u>Cost per Mon.</u>	<u>Annual Cost</u>
37	Admin fee to the case management			\$40.00	\$0
38	agency for processing payments.				
39					
40	<b>Signatures:</b>				
41					
42	Consumer/Surrogate		Date		Case Manager
43					
44					

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2	<b>OD 906</b> (01/2022)	
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4	Date of Birth:	
5	Relationship:	
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11	<p><b>*\$3,500 is a soft cap. Agencies may exceed this amount if their funds allow.</b></p> <p><b>eds.</b></p> <p><b>*Hourly wage = no less than \$13.44/hr and no more than \$25.00.</b></p>	
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	F	G
30	*Annual cost column formula = hourly wage X 13.09% unemploy/workers comp insurance)	
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42	Date	
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